

SCANNED

PLAINTIFF

Randolph S. Tangle

DEFENDANT

JAMES MUSCARELLA, or Jim ?

COURT CASE NUMBER

CF-05-114 E

TYPE OF PROCESS

42 USC § 1983

SERVE AT { JAMES MUSCARELLA, Chief Court Reporter
NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN
ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

ERIE Co. Courthouse, 140 West Sixth Str.

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW

OFFICE AND Chief Court Reporter
Jim or JAMES MUSCARELLA
303 rm. Courthouse
140 WEST Sixth STREET
ERIE PA 16501

Number of process to be served with this Form 285

3

Number of parties to be served in this case

5

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses,
All Telephone Numbers, and Estimated Times Available for Service):Attorney for JAMES MUSCARELLA
ERIE County Solicitor Office

Fold

John A Onorato
140 WEST Sixth STREET
ERIE PA 16501OFFICIAL Court Reporter
JAMES MUSCARELLA, Chief
303 Courthouse
814 451-6284
FAX 451-7680 PLAINTIFF
 DEFENDANT

TELEPHONE NUMBER

DATE

4-8-05

Signature of Attorney other Originator requesting service on behalf of:

Randolph S. Tangle

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process	District of Origin No. _____	District to Serve No. _____	Signature of Authorized USMS Deputy or Clerk	Date _____
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I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the individual, company, corporation, etc. shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

A person of suitable age and discretion then residing in defendant's usual place of abode

Date 7/26/05 Time am pm

Signature of U.S. Marshal or Deputy
Sue B. Kerney

Service Fee <i>Sue</i>	Total Mileage Charges including endeavors	Forwarding Fee	Total Charges <i>Sue</i>	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS: MAILED 7-12-05

PRIOR EDITIONS
MAY BE USED

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

WAIVER OF SERVICE OF SUMMONS

TO: United States Marshal's Service

I acknowledge receipt of your request that I waive service of a summons in the action of _____ vs. _____ which is case number _____ in the United States District Court for the Western District of Pennsylvania. I have also received a copy of the complaint in the action, two copies of this instrument, and a means by which I can return the signed waiver to you without cost to me.

I agree to save the cost of service of a summons and an additional copy of the complaint in this lawsuit by not requiring that I (or the entity on whose behalf I am acting) be served with judicial process in the manner provided by Rule 4.

I (or the entity on whose behalf I am acting) will retain all defenses or objections to the lawsuit or to the jurisdiction or venue of the court except for objections based on a defect in the summons or in the service of the summons.

I understand that a judgment may be entered against me (or the party on whose behalf I am acting) if an answer or motion under Rule 12 is not served upon you within 60 days after 7-12-05 (date, request was sent), or within 90 days after that date if the request was sent outside the United States.

SIGNATURE

Printed/typed name: John A. ONORATO

Title if any: Chief County Solicitor

Counsel For: JAMES MUSARELLA, Chief Court Reporter

7/26/05

5-114E
JAMES MUSARELLA